| |]Fa | iled 🗌 | Closed IHH | State of Maine I | Hea | ltł | h Ir | าร | pection | on Report | t | | Pag | e 1 of 4 | 1 |
|--|---|---|---|--|--|-----------------------|--|---|--|---|------------------|------------------------------|---------------------|--------------------|---------------|
| Establishment Name As Authorized by 22 MRSA § 2496 | | | | | Critical Violations | | | | | | | 0 | Date | | 24/2021 |
| | | | | | Non-Critical Violations Certified Food Protection Manager | | | | | Time In Time Ou | | | <u>5 PM</u> 0 PM | | |
| <u> </u> | | | | | | City | | | | | | E | Telepho | | <u> </u> |
| License Expiry Date/EST. ID# Address / 29839 1567 LISBON ST STE# 6 | | | | | | LEWISTON | | | Zip Code 04240 | | | 11e 14-4417 | | | |
| License Type Owner Name | | | | | | Purpose of Inspection | | | 1 | License Posted Risk Category | | | , | | |
| MUN - EATING PLACE TAKEOUT ME BEAUTIFUL LLC | | | | | | | • | | • | | No No | | Lov | | •' |
| | | | | | | | New Establishment Report ORS AND PUBLIC HEALTH INTERVENTION | | | | | | 1=0. | - | |
| | Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark"X" in appropriate box for COS and/or R | | | | | | | | | | | | | | |
| | | Circle desig i =in complian | · · | | ered it not app | | ole | | | Mark"X" in appropo S=corrected on-site | | | | at violatio | n |
| Co | mnl | iance Statu | e | | cos | R | | Con | npliance S | tatus | | | | | cos R |
| Supervision Potentially Hazardous Food Time/Temperature | | | | | | | | | | | | 10001 | | | |
| 1 IN PIC present, demonstrates knowledge, and | | | ates knowledge, and | 16 IN Proper cooking time & te | | | | | | | | | $\bot \bot$ | | |
| | | | performs duties Employee Health | | | | 17 | _ | IN | Proper reheati | <u> </u> | | | g | ++ |
| 2 | | IN | Management awarenes | - | $\overline{}$ | П | 18 19 | | IN IN | Proper cooling Proper hot hold | | | es | | ++ |
| 3 | | IN | Proper use of reporting | g, restriction & exclusion | | | 20 | | IN | Proper cold ho | | | | | + |
| | | 10.1 | | jienic Practices | | | 21 | | IN | Proper date ma | | | | | ++ |
| <u>4</u> 5 | | IN IN | Proper eating, tasting, No discharge from eyes | drinking, or tobacco use | + | Н | 22 | ⊢ | The first states that the first states | | | control: procedures & record | | , | |
| | | | | mination by Hands | | | | Consumer Advisory | | | | | | | |
| 6 | | IN | Hands clean & properly | | \top | П | Consumer advisory provided for raw or | | | | | | | $\top \top$ | |
| 7 | | | No bare hand contact v | vith RTE foods or approved | | | 23 | | IN | undercooked fo | oods | | | | $\perp \perp$ |
| ′ | | IN | alternate method prope | erly followed | | | | | | Highly Susce | ptible Popula | tions | | | |
| 8 | | IN | Adequate handwashing | g facilities supplied & accessible | | | 24 | | IN | Pasteurized for | ods used; pro | hibited | d foods n | ot | |
| | | | Approv | red Source | | | | | | offered | Ohamiaal | | | | |
| 9 | | IN | Food obtained from app | proved source | | | 25 | Г | IN | | Chemical | | -ll | | |
| 10 | | IN | Food received at prope | er temperature | | | 26 | | | Food additives | | | | -1 01 | ++ |
| 11 | | IN | Food in good condition | , safe, & unadulterated | | | -~ | | IN | Toxic substanc | <u> </u> | | | a & usea | |
| 12 | | IN | Required records avail | able: shellstock tags | | | | П | | Conformance with | | | | | т т |
| | | | parasite destruction | | \perp | ш | 27 | | IN | Compliance wi | ın variance, s | speciai | izea proc | ess, | |
| 13 | | INI | | om Contamination | $\overline{}$ | | ᆘᆛ | | | | | | | | |
| 14 | | IN Food separated & protected IN Food-contact surfaces: cleaned and sanitized | | + | Н | 1 | Ris | k Factors | are improper prac | ctices or proce | dures id | lentified as | the most | | |
| | | | Proper disposition of returned previously served | | | | | | | | | | | | |
| 15 IN Proper disposition of returned, previously served, reconditioned, & unsafe food | | | | | | | | or injury. | | | | | | | |
| | | | | GOOD | RET/ | ۱L | PRA | CT | ICES | | | | | | |
| | | | Good Retail Practices are | preventative measures to control the | additi | on of | f patho | ogen | s, chemical | s, and physical obje | ects into foods. | | | | |
| Ma | rk ") | K" in box if n | umbered item is not in com | pliance Mark "X" in appropriat | e box f | or C | OS ar | nd/or | R CC | S=corrected on-site | e during inspec | tion | R=repea | t violation | |
| | | | | | cos | R | | | | | | | | | COS R |
| | | | Safe Food and | Water | | | Proper Use of Utensils | | | | | | | | |
| 28 IN Pasteurized eggs used where required | | | | | | Т | 41 IN In-use utensils: properly stored | | | | | | | T | |
| 29 | IN | | e from approved source | | \top | T | 42 | - | | equipment, & line | | tored. | dried, & | handled | + |
| 30 | IN | Variance obtained for specialized processing methods | | 1 | | 43 | IN | | -use & single-service articles: properly stored & used | | | | | | |
| Food Temperature Control | | | | | | | 44 | 44 IN Gloves used properly | | | | | | | |
| 31 | INI | Proper co | oling methods used; ade | quate equipment for | | П | | Utensils, Equipment and Vending | | | | | | | |
| | | temperatu | re control | | | _ | 45 | IN | | on-food contact su | | | | | |
| 32 | IN | Plant food | properly cooked for hot | holding | | | ١Ľ | ļ., | properly | designed, constru | cted, & used | | | | $\bot \bot$ |
| 33 | IN | Approved | thawing methods used | | | | 46 | - | Warewas | hing facilities: inst | talled, mainta | ined, 8 | & used; te | st strips | $\bot \bot$ |
| 34 | IN | Thermome | eters provided and accur | rate | | 上 | 47 | 47 Non-food contact surfaces clean | | | | | | $\perp \perp$ | |
| | Food Identification | | | | | | | Physical Facilities | | | | | | | |
| 35 N Food properly labeled; original container | | | | | | _ | 48 | - | | d water available; | | | | | ++ |
| | | | Prevention of Food Cont | | | _ | 49 | - | | installed; proper | | | | | ++ |
| | IN Insects, rodents, & animals not present | | | + | 1 | | 50 N Sewage & waste water properly disposed | | | | | | | ++ | |
| 37 N Contamination prevented during food preparation, storage & display | | | | <u>' </u> | 1 | | 51 IN Toilet facilities: properly constructed, supplied, & cleaned | | | | | | | ++ | |
| 38 N Personal cleanliness | | | | | | + | ∙ ⊢ | 52 IN Garbage & refuse properly disposed; facilities maintained | | | | | | | ++ |
| 39 N Wiping cloths: properly used & stored | | | | | | + | 53 | - | | facilities installed, | | | | | ++ |
| 40 N Washing fruits & vegetables 54 N Adequate ventilation & lighting; designated areas used | | | | | | | | | | | | | | | |
| | Breake Taly DE | | | | | | | | | | | | | | |
| Person in Charge (Signature) Date: 11/24/2021 | | | | | | | | | | | | | | | |
| Health Inspector (Signature) | | | | | | | | | | | | | | | |
| LOUIS LACHANCE Follow-up: Tyes NO Date of Follow-up: | | | | | | | | | | | | | | | |
| | | | | | | | | | • | | | | | | |

| State of Maine Health Inspection Report Page 2 of 4 | | | | | | | | | | |
|---|--------------------------|----------------------------------|--|-------------------------------|--|---------------------------|--|--|--|--|
| Establishment Name MEBEAUTIFUL | As Authorized b | Date 11/24/2021 | | | | | | | | |
| License Expiry Date/EST. ID# / 29839 | Address 1567 LISBON S | Address 1567 LISBON ST STE# 6 | | City / State LEWISTON / ME | | Telephone 207-894-4417 | | | | |
| Temperature Observations | | | | | | | | | | |
| Location | Temperature | | | Notes | | | | | | |
| Hand wash sink | 103* | | | | | | | | | |
| 3 bay sink | 117* | | | | | | | | | |
| Single door cooler | 38* | air temp | | | | | | | | |

Brooke Joly PF

Date: 11/24/2021

Person in Charge (Signature)

Health Inspector (Signature) LOUIS LACHANCE



State of Maine Health Inspection Report

Establishment Name

MEBEAUTIFUL

License Expiry Date/EST. ID# /29839

Address 1567 LISBON ST STE# 6

City / State LEWISTON ME 04240

Address 1567 LISBON ST STE# 6

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

Person in Charge (Signature)

Health Inspector (Signature) LOUIS LACHANCE



Date: 11/24/2021

| | Page 4 of 4 | | | | |
|---|----------------------------------|--------------------------|----|-------------------|-----------------|
| Establishment Name | | | | | Date 11/24/2021 |
| MEBEAUTIFUL | | | | | |
| License Expiry Date/EST. ID# / 29839 | Address 1567 LISBON ST STE# 6 | City / State LEWISTON | ME | Zip Code 04240 | |

Inspection Notes

**OK TO ISSUE LICENSE

**EMPLOYEE HEALTH POLICY REVIEWED

Certified Food Protection Manager: EXEMPT

Every eating establishment must employ on its staff a Certified Food Protection Manager (CFPM). Some establishments are exempt from this requirement. A CFPM certificate must accompany the application for a new establishment and change of ownership. A CFPM must be hired within 60 days of the departure of the last CFPM leaving employment. Eating establishments must post in a conspicuous area the certification of the CFPM(s), and the certificate must be made available to the Department upon request. For a list of CFPM courses and trainers go to http://www.maine.gov/healthinspection/training.htm. Please provide a copy of this certification(s) to Casandra Lavallee, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333, casandra.lavallee@maine.gov or faxing to 207-287-3165. Please include the name of your establishment and the establishment ID# with your certification(s).

Employee Health Policy

The Health Inspection Program implemented an educational public health initiative on Employee Health on March 1, 2017. The policy handouts will be provided to you by your inspector and reviewed during inspection for compliance. They are also available on the Program's website: http://www.maine.gov/healthinspection

Violation Correction Timeframe

Critical violations should be corrected on site, but in any event, within 10 days. The licensee must contact your inspector, Laurie Davis when the critical violation has been addressed at 207-592-5573 or laurie.davis@maine.gov. Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation

"Critical violation" means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

Additional Inspection Fee

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

Document Retention/Posting

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

Date: 11/24/2021

Brooke Toly PF

Person in Charge (Signature)

Health Inspector (Signature) LOUIS LACHANCE たた

HHE-601(a)Rev.01/07/10 Page 4 of 4